File Original and First Copy with Department of Ecology Second Copy — Owner's Copy 3 0/3/5/// Third Copy — Driller's Copy 3 0/3/5/// STATE OF W	
- // / // 	Address 3325 S.C. Dymnowy Cymano J. SE y NWy Sec. 14 730 N. R3EWM.
(3) PROPOSED USE: Domestic Industrial Municipal Irrigation Test Well Other	(10) WELL LOG: Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.
(4) TYPE OF WORK: Owner's number of well 2 New well Method: Dug Bored Deepened Cable Driven Reconditioned Rotary Jetted	MATERIAL FROM TO TOPSOI HARD CIRCLES 2 15
(5) DIMENSIONS: Diameter of well 36 inches. Depth of completed well 30 ft.	Winter Dearing Synd 20 30
(6) CONSTRUCTION DETAILS: Casing installed: 36 "Diam. from 1 tt. to 30 tt. Threaded 1 "Diam. from ft. to tt. Welded 1 "Diam. from ft. to tt. Welded 1 "Diam. from ft. to tt. Perforations: Yes 1 No 1 Type of perforator used size of perforations in. by in. perforations from ft. to ft. perforations from ft. to ft. perforations from ft. to ft.	
Screens: Yes No Manufacturer's Name. Type	
Surface seal: Yes M No To what depth? ft. Material used in Seal Did any strata contain unusable veter? Yes No M Type of water? Depth of strata Method of sealing strata off. (7) PUMP: Manufacturer's Name 7/17, 4/1/1719 HP 3/17	
(8) WATER LEVELS: Land-surface elevation above mean sea level. 25 At. Static level 20 tt below top of well Date. Artesian pressure lbs. per square inch Date. Artesian water is controlled by (Cap, valve, etc.)	
(9) WELL TESTS: Was a pump test made? Yes No If yes, by whom? Yield: gal./min. with ft. drawdown after hrs.	Work started Oct
Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level) Time Water Level Time Water Level Time Water Level Date of test Bailer test [5] gal./min. with [7] ft. drawdown after hrs Artesian flow [8] p.m. Date Temperature of water [8] Was a chemical analysis made? Yes [7] No [8]	NAME (Person, firm, or corporation) (Type or print) Address 33255 E (Amano D) [Signed] Med Well Driller)

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